

PLACE OF BIRTH

CERTIFICATE OF BIRTH

STATE OF SOUTH CAROLINA
Bureau of Vital Statistics
State Board of Health

9992

County of Clarendon

Municipality of Mt. Zion

City of Wichita

Registration District No. 1317

Registered No. 6
(For use of Local Registrar)

(If birth occurs in a hospital or other institution, give name of same instead of street and number.)

(2) Full Name of Child Walter Dupree

(1) Sex Boy (2) Age 33 (3) Number in order of birth 1 (4) Race Yes (5) Date of birth Feb 5 1933

FATHER:
(1) Name Jes. Dupree
(2) Present address Wilson
(3) Color Colored (4) Age at last birthday 33
(5) Birthplace Clarendon
(6) Occupation Farming
(7) Number of children born to mother, including present birth 6

MOTHER:
(1) Name before Ann Moore
(2) Present address Wilson S.C.
(3) Color Colored (4) Age at last birthday 31
(5) Birthplace Clarendon
(6) Occupation House work
(7) Number of children of this mother now living, including present birth 6

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
(8) I hereby certify that I attended the birth of this child, who was Rose Olive on the date above stated.
(9) (Signature) Lucy Brooker
(10) State whether Physician or midwife (11) Address of Physician or Midwife Mt. Zion

Given name added from a supplemental report
(12) Witness (Signature of Witness necessary only when question 11 is signed by mark)
(13) Date Mar 2 1933 (14) Local Registrar W. P. Spott

When there was no attending physician or midwife, then the father, householder, etc., should make this return. If a child breathes even once, it must not be reported as stillborn. No report is desired of stillbirths before the fifth month of pregnancy.